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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/720,603			ling Date 24/2003	To be Mailed		
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN		
⊢	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)		
	BASIC FEE		N/A	.ED	N/A		N/A	ILL (4)		N/A	TEE (0)		
┢	(37 CFR 1.16(a), (b), s SEARCH FEF	or (c))							ł	H			
	(37 CFR 1.16(k), (i), or EXAMINATION FE		N/A	$-\!\!\!\!\!+\!\!\!\!\!\!-$	N/A		N/A		l	N/A			
TO	(37 CFR 1.16(a), (p), (		N/A		N/A		N/A			N/A			
(37	CFR 1.16(i) DEPENDENT CLAIM		minus 20 = *			ļ	x \$ =		OR	x \$ =			
	CFR 1.16(h))		minus 3 = *			l	x \$ =			x s =			
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 s	gs exceed 100 in size fee due for each in thereof. See CFR 1.16(s).									
	MULTIPLE DEPEN	IDENT CLAIM PR	ESENT (3	7 CFR 1.16(j))					1				
* If	the difference in colu	umn 1 is less than	r "0" in column 2.		TOTAL		]	TOTAL					
	APPLICATION AS AMENDED – PART II  (Column 1) (Column 2) (Column 3)							SMALL ENTITY OF			OTHER THAN R SMALL ENTITY		
TN	07/10/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
AMENDMENT	Total (37 CFR 1.16(i))	• 3	Minus	·· 21	= 0	1	X \$25 =	0	OR	x s =	7		
Z	Independent (37 CFR 1.16(h))	• 1	Minus	<b></b> 3	= 0	1	X \$105 =	0	OR	x \$ =			
ME	Application Size Fee (37 CFR 1.16(s))												
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR				
						•	TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE			
		(Column 1)		(Column 2)	(Column 3)								
_		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
Z I	Total (37 CFR 1,16())		Minus		=	1	x \$ =		OR	x s =			
AMENDMENT	Independent (37 CFR 1/16(h))		Minus	***	=	1	X \$ =		OR	x s =			
ᇳ	Application Size Fee (37 CFR 1.16(s))					1			]				
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR				
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
**	" If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  " If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.												

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